

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #
(Ethics Commission filers)
00000001

2 PAGE #
1 of 27

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR Mrs. FIRST Laura MI
NICKNAME LAST Morrison SUFFIX

OFFICE USE ONLY

2011 JUL 7 PM 5:21
AUSTIN CITY CLERK RECEIVED

Date Received

Date Hand-delivered or Date Postmarked

Receipt # Amount

Date Processed

Date Imaged

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

610 Baylor Street
Austin, TX 78703

Change of Address

5 CAMPAIGN TREASURER NAME

MS / MRS / MR Mr. FIRST Mark MI
NICKNAME LAST Perlmutter SUFFIX

6 CAMPAIGN TREASURER ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

1717 West 6th Street
Suite 375
Austin, TX 78703

7 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(512) 476-4944

8 REPORT TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only)

July 15 8th day before election Exceeded \$500 limit Final report (Attach C/OH - FR)

9 PERIOD COVERED

Month Day Year THROUGH Month Day Year

05/05/2011 THROUGH 06/30/2011

10 ELECTION

ELECTION DATE ELECTION TYPE

Month Day Year Primary Runoff General Special

05/14/2011

11 OFFICE OFFICE HELD (if any)
Austin City Council District 4

12 OFFICE SOUGHT (if known)
Austin City Council District 4

13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

... Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ...

Name

Address/PO Box; Apt. / Suite #; City; State; Zip Code

additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Morrison, Laura (Mrs.)

15 ACCOUNT # (Ethics Commission filers)
00000001

16 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME
Better Austin Today PAC

GENERAL

COMMITTEE ADDRESS
P.O. Box 91041
Austin, TX 78709-1041

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME
Ogunro, Sunny

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS
P.O. Box 91041
Austin, TX 78709

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	12,940.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	60.00
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4. TOTAL POLITICAL EXPENDITURES	\$	61,012.74
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CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	6,095.28
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
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18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Laura Morrison
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Laura Morrison, this the 7 day of July, 2011, to certify which, witness my hand and seal of office.

Reyna Ruiz

Reyna Ruiz

Admin Specialist

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/14 Report: 3/27	
2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 05/10/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Abbott, Robin 6 Contributor address; City; State; Zip Code 5601 Blueridge Court Austin, TX 78731	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Aguirre, Lupe Contributor address; City; State; Zip Code 2210 White Dove Pass Austin, TX 78734	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Store Manager		Employer (See Instructions) Bealls	
Date 05/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Albright, Thomas Contributor address; City; State; Zip Code 1305 Alla Vista Avenue Austin, TX 78704	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/05/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alexander, Mike Contributor address; City; State; Zip Code 2827 Salado Street Austin, TX 78705	Amount of contribution (\$) \$75.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/07/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Arriola, Richard Contributor address; City; State; Zip Code 7700 Whispering Winds Drive Austin, TX 78745	Amount of contribution (\$) \$10.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/14 Report: 4/27	
2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 05/10/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bailey, Brooke 6 Contributor address; City; State; Zip Code 1801 West 10th Street Austin, TX 78703	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bailey, Heather Contributor address; City; State; Zip Code 1500 Raleigh Avenue Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/06/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barker, Bobbie Contributor address; City; State; Zip Code 802 Terrace Mountain Drive Austin, TX 78746	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/08/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burton, Charles Contributor address; City; State; Zip Code 1118 Mission Ridge Austin, TX 78704	Amount of contribution (\$) \$40.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/14/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carroll, Marianne Contributor address; City; State; Zip Code 210 Lee Barton Drive Unit 613 Austin, TX 78704	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 3/14 Report: 5/27

2 FILER NAME Morrison, Laura (Mrs.)

3 ACCOUNT # (Ethics Commission filers)
00000001

4 Date 05/10/2011
5 Full name of contributor out-of-state PAC (ID# _____)
Carlidge, Ron

7 Amount of contribution (\$) \$30.00
8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
1802 Woodland Avenue
Austin, TX 78741

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date 05/05/2011
Full name of contributor out-of-state PAC (ID# _____)
Cates, Nancy

Amount of contribution (\$) \$100.00
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
P.O. Box 1163
Dripping Springs, TX 78620

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 05/10/2011
Full name of contributor out-of-state PAC (ID# _____)
Dougherty, Molly

Amount of contribution (\$) \$15.00
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
1100 Claire Drive
Austin, TX 78703

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 05/07/2011
Full name of contributor out-of-state PAC (ID# _____)
Elfant, Bruce

Amount of contribution (\$) \$100.00
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
4522 Avenue F
Austin, TX 78751

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 05/09/2011
Full name of contributor out-of-state PAC (ID# _____)
Friese, Karen

Amount of contribution (\$) \$350.00
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
6603 Cat Creek Trail
Austin, TX 78731

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Engineer

Employer (See Instructions)
K Friese & Associates

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/14 Report: 6/27	
2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 05/10/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fuselier, James 6 Contributor address; City; State; Zip Code 5804 Garden Oaks Austin, TX 78745	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Dentist		10 Employer (See Instructions) Self	
Date 05/07/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Genet, Kathy Contributor address; City; State; Zip Code 3000 Kerbey Lane Austin, TX 78703	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/13/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gentle, James Contributor address; City; State; Zip Code 2006 Arthur Lane Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/13/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ginsberg, Michael Contributor address; City; State; Zip Code 2901 Cityplace West Boulevard Apt. 617 Dallas, TX 75204	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Program Director		Employer (See Instructions) Palmer Drug Abuse Program of Austin	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Graham, Lawrence Contributor address; City; State; Zip Code 5909 Bull Creek Road Austin, TX 78757	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/14 Report: 7/27	
2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 05/10/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Greenberg, Leigh Anne 6 Contributor address; City; State; Zip Code 1522 South Congress Avenue Austin, TX 78704	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions) *Student		10 Employer (See Instructions) None	
Date 05/07/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Greenberg, Sean Contributor address; City; State; Zip Code 330 Eanes School Road Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) *Buyer		Employer (See Instructions) Allen's Boots	
Date 05/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Greenberg, Stephen Contributor address; City; State; Zip Code 1522 South Congress Avenue Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) *Owner		Employer (See Instructions) Allen's Boots	
Date 05/13/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hammond, Granville Contributor address; City; State; Zip Code 403 Chaparral Road Austin, TX 78745	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Auditor		Employer (See Instructions) City of Austin	
Date 05/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harris, Karen Contributor address; City; State; Zip Code 1409 Alameda Drive Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/14 Report: 8/27	
2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 05/10/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hartman, David 6 Contributor address; City; State; Zip Code 300 Bowie Street #1008 Austin, TX 78703	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/08/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harutunian, Anne Contributor address; City; State; Zip Code P.O. Box W Austin, TX 78713	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Marketing Director		Employer (See Instructions) Harutunian Engineering	
Date 05/08/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harutunian, Takoohy Contributor address; City; State; Zip Code P.O. Box W Austin, TX 78713	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Harutunian Engineering	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hauser, Adam Contributor address; City; State; Zip Code 7701 Bramblewood Circle Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) *Attorney		Employer (See Instructions) Brown McCarroll	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Head, Bill Contributor address; City; State; Zip Code 1104 Enfield Drive Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) <input type="checkbox"/> (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/14 Report: 9/27	
2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 05/07/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Holderness, Earl 6 Contributor address; City; State; Zip Code 2943 Thousand Oaks Drive Austin, TX 78746	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/06/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hopkins, William Contributor address; City; State; Zip Code 3324 Silkgrass Bend Austin, TX 78748	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) *Attorney		Employer (See Instructions) Brown McCarroll	
Date 05/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hughes, Chris Contributor address; City; State; Zip Code 6205 Indian Canyon Drive Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) *Attorney		Employer (See Instructions) Brown McCarroll	
Date 05/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jefferson, Ellen Contributor address; City; State; Zip Code 1400 Eva Street Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/06/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnson, Rodman Contributor address; City; State; Zip Code 4204 Venado Drive Austin, TX 78731	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) *Attorney		Employer (See Instructions) Brown McCarroll	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/14 Report: 10/27	
2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 05/13/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jung, Richard 6 Contributor address; City; State; Zip Code 2530 Harris Boulevard Austin, TX 78703	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Principal		10 Employer (See Instructions) Jung & Associates, PLLC	
Date 05/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kauffman, Brad Contributor address; City; State; Zip Code 7006 Priscilla Drive Austin, TX 78752	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/13/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kim, Paul Contributor address; City; State; Zip Code 10524 Roy Butler Drive Austin, TX 78717	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) ATX Environmental Solutions, LLC	
Date 05/06/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Larson, Dohn Contributor address; City; State; Zip Code 1008 East 44th Street Austin, TX 78751	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) *Attorney		Employer (See Instructions) Texas Classroom Teacher's Association	
Date 05/09/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lehman, Chris Contributor address; City; State; Zip Code 1914 A Larchmont Drive Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/14 Report: 11/27	
2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 05/10/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Matula, Judy 6 Contributor address; City; State; Zip Code 5917 Lookout Mountain Drive Austin, TX 78731	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McClendon, Jim Contributor address; City; State; Zip Code 3810 Meandering Creek Cove Austin, TX 78746	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 05/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McElhatten, Karen Contributor address; City; State; Zip Code 7108 Gentle Oak Drive Austin, TX 78749	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 05/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McWilliams, Andrea Contributor address; City; State; Zip Code 1710 Windsor Road Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Founder		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions) McWilliams Governmental Affairs			
Date 05/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McWilliams, Dean Contributor address; City; State; Zip Code 1710 Windsor Road Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Founder		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions) McWilliams Governmental Affairs			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/14 Report: 12/27	
2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 05/06/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meade, Gloria 6 Contributor address; City; State; Zip Code 19822 Teller Boulevard Spring, TX 77388	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) *		10 Employer (See Instructions)	
Date 05/06/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meade, Kyyla Contributor address; City; State; Zip Code 5363 Austral Loop Austin, TX 78739	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) *Student		Employer (See Instructions) None	
Date 05/06/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meade, Manuel Contributor address; City; State; Zip Code 19822 Teller Boulevard Spring, TX 77388	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) *		Employer (See Instructions)	
Date 05/06/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meade, Mark Contributor address; City; State; Zip Code 2016 Fall Creek Drive Leander, TX 78641	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) *		Employer (See Instructions)	
Date 05/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Menyhert, Joy Contributor address; City; State; Zip Code 1507 Mohle Drive Austin, TX 78703	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/14 Report: 13/27	
2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 05/09/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meyer, Gretchen 6 Contributor address; City; State; Zip Code 1406 Kinney Avenue Austin, TX 78704	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/13/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Michel, Lorri Contributor address; City; State; Zip Code 917 West Lynn Street Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Michel Law Firm	
Date 05/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oliver, Guy Contributor address; City; State; Zip Code 3119 Honey Tree Lane Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) *General Manager		Employer (See Instructions) MTG Management	
Date 05/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oliver, Jason Contributor address; City; State; Zip Code 3267 Bee Cave Road #107 #92 Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) *Land Manager		Employer (See Instructions) MTG Management	
Date 05/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oliver, Kerianne Contributor address; City; State; Zip Code 3119 Honey Tree Lane Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) *Homemaker		Employer (See Instructions) None	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/14 Report: 14/27	
2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 05/10/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oliver, Stacy 6 Contributor address; City; State; Zip Code 3267 Bee Cave Road #107 #92 Austin, TX 78746	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) *Owner		10 Employer (See Instructions) MTG Management	
Date 05/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oliver, Vicki Contributor address; City; State; Zip Code 3267 Bee Cave Road #107 #92 Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) *Owner		Employer (See Instructions) MTG Management	
Date 05/06/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Phillips, Travis Contributor address; City; State; Zip Code 2309 Farnswood Circle Austin, TX 78704	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/06/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pyle, Melanie Contributor address; City; State; Zip Code 2016 Fall Creek Drive Leander, TX 78641	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rao, Mohan Contributor address; City; State; Zip Code 6202 Peggy Street Austin, TX 78723	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 13/14 Report: 15/27	
2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date 05/10/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Russell, Kim 6 Contributor address; City; State; Zip Code 7813 Via Verde Drive Austin, TX 78739	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/14/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sharples, Brian Contributor address; City; State; Zip Code 23 Hull Circle Drive Austin, TX 78746	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/14/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sharples, Tracey Contributor address; City; State; Zip Code 23 Hull Circle Drive Austin, TX 78746	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/14/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shepherd, Carl Contributor address; City; State; Zip Code 301 Briarwood Trail Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) *Executive		Employer (See Instructions) HomeAway	
Date 05/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thompson, James Contributor address; City; State; Zip Code 3310-A Doolin Drive Austin, TX 78704	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/10 Report: 17/27		2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (TEC filers) 00000001	
4 Date 05/08/2011	5 Payee name Armand, Reginald				
6 Amount (\$) \$291.50	7 Payee address City; State; Zip Code 2200 South Pleasant Valley Austin, TX 78741				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 05/14/2011	Payee name Armand, Reginald				
Amount (\$) \$319.00	Payee address City; State; Zip Code 2200 South Pleasant Valley Austin, TX 78741				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 05/12/2011	Payee name AT&T				
Amount (\$) \$82.70	Payee address City; State; Zip Code 1011 West 5th Street Austin, TX 78703				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Phone Service		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 05/09/2011	Payee name Austin Chronicle				
Amount (\$) \$1,870.00	Payee address City; State; Zip Code P.O. Box 49066 Austin, TX 78765				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/10 Report: 18/27	2 FILER NAME Morrison, Laura (Mrs.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 05/13/2011	5 Payee name Badgley, Shawn
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6 Amount (\$) \$1,750.00	7 Payee address City; State; Zip Code 1005 Edgecliff Terrace Austin, TX 78704
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/30/2011	Payee name Badgley, Shawn
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Amount (\$) \$3,500.00	Payee address City; State; Zip Code 1005 Edgecliff Terrace Austin, TX 78704
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/08/2011	Payee name Black, Kevin
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Amount (\$) \$350.75	Payee address City; State; Zip Code 4606 Bennett Avenue Austin, TX 78751
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/14/2011	Payee name Black, Kevin
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Amount (\$) \$247.25	Payee address City; State; Zip Code 4606 Bennett Avenue Austin, TX 78751
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/10 Report: 19/27	2 FILER NAME Morrison, Laura (Mrs.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 05/30/2011	5 Payee name Black, Kevin
6 Amount (\$) \$500.00	7 Payee address City; State; Zip Code 4606 Bennett Avenue Austin, TX 78751

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/30/2011	Payee name Butts, David
Amount (\$) \$5,000.00	Payee address City; State; Zip Code 1914 Patton Lane Austin, TX 78723

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting Fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/09/2011	Payee name Checkmark Typesetting
Amount (\$) \$97.43	Payee address City; State; Zip Code 3217 N IH-35 Austin, TX 78722

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Design work
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/14/2011	Payee name CVS Pharmacy
Amount (\$) \$20.26	Payee address City; State; Zip Code 2927 Guadalupe Street Austin, TX 78705

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food supplies for Election Day
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/10 Report: 20/27	2 FILER NAME Morrison, Laura (Mrs.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 05/12/2011	5 Payee name Good Luck Food Mart
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6 Amount (\$) \$15.05	7 Payee address City; State; Zip Code 3713 Guadalupe Street Austin, TX 78705
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Beverages for staff
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/30/2011	Payee name Levinski, Robert
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Amount (\$) \$1,000.00	Payee address City; State; Zip Code 5800 Duval Street Austin, TX 78752
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting Fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/14/2011	Payee name Lopez, Anthony
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Amount (\$) \$319.00	Payee address City; State; Zip Code 3605 Savage Springs Drive Austin, TX 78754
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/07/2011	Payee name Maria's Taco Xpress
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Amount (\$) \$28.14	Payee address City; State; Zip Code 2529 South Lamar Boulevard Austin, TX 78704
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Costs
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/10 Report: 21/27		2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (TEC filers) 00000001	
4 Date 05/30/2011		5 Payee name Morrison, Laura			
6 Amount (\$) \$32,878.40		7 Payee address City; State; Zip Code 610 Baylor Street Austin, TX 78703			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Loan Repayment	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/09/2011		Payee name OfficeMax			
Amount (\$) \$32.46		Payee address City; State; Zip Code 907 West 5th Street Austin, TX 78703			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/10/2011		Payee name OfficeMax			
Amount (\$) \$14.91		Payee address City; State; Zip Code 907 West 5th Street Austin, TX 78703			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/07/2011		Payee name Oliver, Bill			
Amount (\$) \$600.00		Payee address City; State; Zip Code 2728 South Congress Avenue #12 Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Music Performance	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/10 Report: 22/27	2 FILER NAME Morrison, Laura (Mrs.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 06/30/2011	5 Payee name PayPal
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6 Amount (\$) \$62.07	7 Payee address City; State; Zip Code 1840 Embarcadero Road Palo Alto, CA 94303
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Cumulative transaction fees for period
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/14/2011	Payee name Pyramid Properties
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Amount (\$) \$238.17	Payee address City; State; Zip Code 1717 West 6th Street Suite 380 Austin, TX 78703
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Utility charges for campaign office
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 06/30/2011	Payee name Pyramid Properties
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Amount (\$) \$220.62	Payee address City; State; Zip Code 1717 West 6th Street Suite 380 Austin, TX 78703
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Utilities for Office
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/30/2011	Payee name Rindy & Associates, Inc.
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Amount (\$) \$1,716.53	Payee address City; State; Zip Code 2401 East 6th Street Suite 1003 Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting Fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/10 Report: 23/27		2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (TEC filers) 00000001	
4 Date 05/08/2011	5 Payee name Romero, Erick				
6 Amount (\$) \$115.50	7 Payee address City; State; Zip Code 5705 Abby Ann Lane Austin, TX 78747				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 05/14/2011	Payee name Romero, Erick				
Amount (\$) \$85.25	Payee address City; State; Zip Code 5705 Abby Ann Lane Austin, TX 78747				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 05/30/2011	Payee name Rush, Barbara				
Amount (\$) \$1,000.00	Payee address City; State; Zip Code 1801 Palmwood Cove Austin, TX 78757				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting Fees		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 05/14/2011	Payee name Scholz Garten				
Amount (\$) \$9.01	Payee address City; State; Zip Code 1607 San Jacinto Boulevard Austin, TX 78701				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Victory Party food and beverages		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 8/10 Report: 24/27		2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (TEC filers) 00000001	
4 Date 05/14/2011	5 Payee name Scholz Garten				
6 Amount (\$) \$620.69	7 Payee address City; State; Zip Code 1607 San Jacinto Boulevard Austin, TX 78701				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Victory Party food and beverages		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/30/2011	Payee name Smith, Jeff				
Amount (\$) \$1,250.00	Payee address City; State; Zip Code 4005 Wrightwood Road Austin, TX 78722				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting Fees		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/10/2011	Payee name Tram Stop Shell				
Amount (\$) \$10.00	Payee address City; State; Zip Code 3201 North Lamar Boulevard Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Ice for Event		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/09/2011	Payee name United States Postal Service				
Amount (\$) \$47.52	Payee address City; State; Zip Code 3507 North Lamar Boulevard Austin, TX 78703				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 9/10 Report: 25/27	2 FILER NAME Morrison, Laura (Mrs.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 05/10/2011	5 Payee name United States Postal Service
6 Amount (\$) \$23.76	7 Payee address City; State; Zip Code 3507 North Lamar Boulevard Austin, TX 78703

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/20/2011	Payee name VerticalResponse, inc.
Amount (\$) \$46.00	Payee address City; State; Zip Code 501 2nd Street Suite 700 San Francisco, CA 94107

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> E-mail Service
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 06/20/2011	Payee name VerticalResponse, Inc.
Amount (\$) \$46.00	Payee address City; State; Zip Code 501 2nd Street Suite 700 San Francisco, CA 94107

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> E-Mail Service
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/14/2011	Payee name Wheatsville Food Co-Op
Amount (\$) \$5.50	Payee address City; State; Zip Code 3101 Guadalupe Street Austin, TX 78705

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Election Day food supplies
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 10/10 Report: 26/27		2 FILER NAME Morrison, Laura (Mrs.)		3 ACCOUNT # (TEC filers) 00000001	
4 Date 05/13/2011		5 Payee name Wick, Jim			
6 Amount (\$) \$2,000.00		7 Payee address City; State; Zip Code 2611 Ektom Drive Unit D Austin, TX 78745			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 05/30/2011		Payee name Wick, Jim			
Amount (\$) \$4,500.00		Payee address City; State; Zip Code 2611 Ektom Drive Unit D Austin, TX 78745			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/1 Report: 27/27	2 FILER NAME Morrison, Laura (Mrs.)	3 ACCOUNT # (TEC filers) 00000001
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4 Date 06/01/2011	5 Payee name AT&T
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6 Amount (\$) \$39.27 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City: State; Zip Code P.O. Box 650574 Dallas, TX 75265
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Phone Service
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PERSONS SOLICITING CONTRIBUTIONS ON YOUR BEHALF

Name of Candidate/Officcholder: LAURA MORRISON

Enter the name and address of any person who has solicited and obtained contributions on your behalf during the reporting period of \$200 per person from five or more individuals. (This requirement does not apply to an individual who raises funds in total amount of \$5,000 or less for a candidate through a fundraising event held at the individual's residence.)

Name of person soliciting contributions	Address
*NIKELLE MEADE	5363 AUSTRAL LOOP, AUSTIN, TX 78739

Reminder: This form is to identify bundlers, i.e. individuals who solicit and obtain contributions on your behalf. Remember there is a separate form to identify the *actual* donors (C/OH).

NOTE: DONATIONS COLLECTED BY BUNDLERS LISTED ABOVE ARE NOTED IN THE "OCCUPATION" FIELD FOR EACH DONATION WITH THE CORRESPONDING ASTERISKS.